

**AFFIDAVIT FOR LOST CPA/PA CERTIFICATE
AND NAME CHANGE**

Tennessee State Board of Accountancy
500 James Robertson Pkwy
Davy Crockett Tower
Nashville, Tennessee 37243-1141

By: _____
(Licensee's Full Name and Address - print or type)

after being duly sworn, deposes and says:

I, _____, hereby advise the Tennessee State Board of Accountancy that my certificate has been lost or I have never received my original CPA wall certificate due to mailing or delivery error. Please furnish me a replacement of my original wall certificate.

(Seal)

Affiant Signature

Certificate Number

Date of Signature

Sworn and subscribed before me this _____ day of _____, 20_____.

Notary Public Signature

My Commission Expires:

NAME CHANGE REQUEST **Fee \$25.00**

Name as you wish it to appear on the certificate

Office Use Only

Lost Certificate Bates # _____

New Certificate Bates # _____